	Barsh SHRIMAN BHAI	JSAHEB	n Prasaral ZADBUK I ARSHI .		Code.					
For college use only →	Course Admitted to:	Division: Roll No:		Form No:		Please paste a passport				
	Admission date: /	1					size (35 mm X 45 mm)			
 Use black ink Fill in all field 	ortant notes before filling-in form: to fill in the form and Do NOT over is in CAPITAL letters only, ichever is NOT applicable. E.g. If yo	write. u are a Male :-> G	ender: Male / Fema	······································			Photograph here, Do NOT staple. Photo should not exceed the borders.			
	Course applied for (e.g.B	A/BCom/BE):								
Course Part or Semester applied for (e.g. 1/2/3/4):					† Student should sign s box only with black ink	Listin variation and consequences and consequences.				
	oncession EBC / SC / ST / NT /	OBC / SBC / PT	C / STC / Freedon	n Fighter /	Ex Service Man :					
1. Personal	Information Section	1	Last Name		First Name		- Middle Name			
	tudent: ged name, write current name) tudent: (In Devnagari script)		EUSE PUITE		institutie.		· Mudie Nulle			
	tudent as printed on				Y					
std. 10 Passing				Т						
Father's/Husb	and's Name:	-								
Mother's Nam	e:									
Previous name (In case of chang	of the Student:									
Reason for na	me change: Willingly / After Ma	arriage	Marital	Status: Un	married / Married/Divorc	ed/ Widowed/Desse	rted			
	DD/MM/YYYY): /	/			Gender: Male / Female		-			
Place of Birth:	4				Blood Group (with Rh):					
Religion:				Citizen o	f (country name):					
Address for Co State:	rrespondence	strict:		Tel	neil:	City/T	own/Village:			
	e no, street/area/suburb etc.)					PIN Code:				
Permanent Ad State:	dress [Write only if different th	nan 'Address for strict:	Correspondence	('] Tel	sil:	City/T	own/Village:			
Address (House	e no, street/area/suburb etc.)	-				PIN Code:	I I I I I I I			
Contact Details						riii code.				
Phone # 1:	STD Code:	Phone No:		Pho	ne # 2: STD Code:	Phon	e No:			
Nobile numbe			Email ID:	1						
. Legal Res	ervation Information Se	ction								
Domicile of Sta Caste:	ste: Ca Sub-Caste	ategory: Open / :	If Physi	ically Chall	rved: SC / ST / DT(A) / NT enged: Visually Impaired , ally Retarded		OBC / SBC rring Impaired / Orthopedic			
. Social Res	servation Information Se	ection [Check				document attached,	in section 6.]			
	man/Ward of Ex-Serviceman			Member of Project Affected Family						
	Active-Serviceman/Ward of Active-Serviceman Freedom Fighter/Ward of Freedom Fighter				Member of Earthquake Affected Family					
	Ward of Primary Teacher				Member of Flood / Famine Affected Family Resident of Tribal Area					
	Ward of Secondary Teacher				Kashmir Migrant					
Deserted/	Divorced/Widowed Women									
	Opted Papers Section [w	rite paper codes	or Paper Name only,							
	ster: 1/3/5/7			-	ster: 2/4/6/8 (If deci	ded in First Sem	ester only)			
				1.						
·			-	3.						
				5.						
				6.						
i.				7.	*					
				7. 8. 9.	· · · · · · · · · · · · · · · · · · ·					

	a 77 - 17 - 10 - 10			Form No.:						
other examin	nations] Please Not		YES' in last column, against the are mandatory in any case			seeking adr	,	d course w	rite NO in front of	
	e Attended:				Year:	-	Roll No.:	T - T	0	
Name of Examination	Name of Board	d /University	Name of School/Colleg	e Date of Passing (DD/MM/Y YYY)	Examination Seat No. (Last)	Passing Certific ate No.	Grade / Total Marks Obtained	Out of	Qualifying Examination? (YES/NO)	
Std 10 th									,	
Std 12 th					A 200 1 1 1 1					
						ļ	*			
6 Guard	ian Information	Section			L					
Guardian's		Jection					300000			
Occupation	n of the Guardian:	Service / Busine	ess / Profession / Farmer /	Laborer / Retired	Annual Income of the Guardian (Rs.):					
Relationshi	ip of guardian with	applicant:	N.		(last financial year) Phone No.:					
7. Attach	ned Documents	and Certific	ates Section							
Sr. No.	Name of Docume				Original / Attest		-	ttached (Yes/No)	
	Passing Certificate				Attested True Co	Attested True Copy (Mandatory)				
2			atement of Marks of Std 1	2 th		Attested True Copy				
	Leaving Certificate				Original Attested True Co					
.	Certificate of Cast			Attested True Co						
5	Non Creamy Layer		riage Certificate / Govt. Ga	zette	Attested frue co	Attested frae copy				
7	Domicile Certificat		lage certificate / dovt. de		Attested True Co	Attested True Copy				
	Certificate for Phy		ed	Attested True Copy						
	ceremente lei i i i			1				Charles		
10							3			
11			*,			;				
B. Other	Information Se	ection	=							
Mother To	ngue:		Employment Sta	tus: Employed / Uner	nployed	Do you	wish to join NO	C/NSS:	Yes / No	
	like to apply for Ho roficiency and Othe									
								-		
	l Sports participation college/state/natio		al etc.):							
ersonal Id	lentification Marks	1.	A		2.					
	ration by Stude		les related to admission	- and the informati	on filled in by me in	this form	is accurate as	d true t	o the best of	
ny knowl	edge. I will be re-	sponsible for a	any discrepancy, arising	g out of the form si	gned by me and I un	dertake th	nat, in absence	e of any	document the	
inal admi am awar	ission will not be re of the Mahara	granted and/ shtra Prohibi	or admission will stand tion of Ragging Act, 19	cancel. 199 and I state that	I will abide by all th	e rules an	d regulations	of the s	said Act.	
Place: Date:		1 1 1		Signature	of the student:					
10. Decla	aration by Guar	rdian	d to join your college. T	he information cur	unlied by him/her is a	orrect to	the best of m	v knowl	edge, I have	
nave per ecquainte	d myself with the	e rules and fe	es, dues to my son/dau	ighter/ward and to	see that he/she obs	erves.	and Desc of III	, KIIOWI	-aper rilare	
Place:										
Date:				Signature	of the Guardian:		222			
1. For Cosignation	College/Institut		Particulars / Recommend	lations	*	П	Signature and	date		
Admission			, moderning in							
	Committee			¥.						
	t/Cashier	Cash Receiv	rod: Rs	Receipt No.:						
Registrar/0		Cash Receiv	veu: NS.	Neceipt No.:						
Superinten		-								
Principal/D	Director					1				